


FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90110 012 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000024251

1. Corporation Name

CENTRAL FLORIDA CONSTRUCTION GROUP, INC.

Principal Place of Business

175 FIFTH ST. N.W. STE. 300
WINTER HAVEN FL 33881

Mailing Address

175 FIFTH ST. N.W. STE. 300
WINTER HAVEN FL 33881

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/13/1998

4. FEI Number

59-3503262

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing ☐**\$5.00** May Be
Added to Fees8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

MCCOY, ERIC V
175 FIFTH ST. N.W. STE. 300
WINTER HAVEN FL 33881

NEW ADDRESS
 →

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 545 AVE I - SE

84 City

WINTER HAVEN

FL

85 Zip Code

33880

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2-17-99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
 NAME **D MCCOY, ERIC V**
 STREET ADDRESS **175 FIFTH ST. N.W. STE. 300**
 CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
 1.2 NAME
 1.3 STREET ADDRESS **545 AVE I - SE**
 1.4 CITY-ST-ZIP **WINTER HAVEN, FL 33880**

2.1 TITLE ☐ Change ☐ Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-99 (941) 298-8442

Date

Daytime Phone #

CR2E034 (1/98)